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Dental

DENTAL SERVICES

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OPR: HQ USAF/SGD
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1. Oral health and hygiene are important components of physical fitness and combat readiness. The Air Force will establish and maintain comprehensive programs for the prevention and treatment of dental disease to ensure maximum personnel readiness.
2. The base dental service will provide a periodic evaluation for all Air Force personnel, establish their dental health classification, and provide and document treatment. An appointment prioritizing system will be used to ensure maximum readiness.
3. This directive establishes the following responsibilities and authorities:
 - 3.1. Headquarters US Air Force is responsible for policy oversight and advocacy of the Air Force Dental Service and for interface with the Office of Secretary of Defense staff concerning development of Department of Defense (DoD) policy and legislative initiatives.
 - 3.2. The Assistant Secretary of the Air Force for Manpower, Reserve Affairs, Installations and Environment (SAF/MI) is responsible for dental services policy matters as described in Air Force Policy Directive 90-1, *Strategic Planning and Policy Formulation*, paragraph 1.5.2. SAF/MI approval is required before this document is changed, reissued, or rescinded.
 - 3.3. The Air Force Director of Dental Services (HQ USAF/SGD) is responsible to the Surgeon General for formulating dental policy, establishing requirements for resources and clinical and laboratory facilities, and the oversight of the Air Force Dental Service.
 - 3.4. Major command dental surgeons are responsible to their command surgeon for providing guidance to base dental surgeons on implementing this policy and for collecting and forwarding required data.
 - 3.5. The Medical Center Director of Dental Services or Base Dental Surgeon is responsible to the Medical Treatment Facility Commander for the daily operation of the dental service and is accountable for managing dental programs, prioritizing access to care, and proper documentation.

4. Terms Explained:

4.1. **Dental Health Classification** includes:

4.1.1. **Class 1**, which indicates no pathologic oral conditions exist and no treatment is required.

4.1.2. **Class 2**, which indicates that oral conditions exist that are not expected to require emergency treatment within 12 months.

4.1.3. **Class 3**, which reflects the presence of oral conditions that are expected to require emergency treatment within 12 months. Personnel in dental health class 3 require immediate attention and will be considered for a physical profile change.

4.1.4. **Class 4**, which indicates dental health is unknown and that a periodic evaluation is required.

4.2. **Optimal Oral Health** indicates that Air Force personnel are qualified for worldwide duty. This includes those in dental class 1 and 2; although, the goal for all Air Force personnel is dental class 1.

4.3. **Comprehensive Programs** include diagnostic services, treatment planning, patient education, preventive procedures, routine restorative and laboratory procedures, and specialty treatment.

5. This directive implements the provisions of Title 10, United States Code, Sections 1074 and 1074a; DoD Instruction 6015.22, *Inter-Service Support Program (ISP) for Military Dental Laboratories*, May 12, 1992; DoD Instruction 6230.3, *Preventive Dentistry Program for Children*, January 17, 1984; DoD Instruction 6410.2, *Standardization of Code on Dental Procedures*, February 13, 1992; and DoD Instruction 6410.1, *Standardization of Dental Classification*, November 8, 1990. The Air Force also recognizes, and this policy implements, civilian standards reflected by the Occupational Safety and Health Administration and the Centers for Disease Control.

6. This policy interfaces with various publications of professional associations; health and safety agencies; DoD; the Air Force Medical Service; AFI 47-101, *Management and Administration of the US Air Force Dental Activities* (formerly AFRs 162-1, 162-2, 162-4, and 162-7); and AFM 30-130, Volume 2, *Personnel Data System (PDS) Unit/GSU Support*.

ALEXANDER M. SLOAN, Lt General, USAF,MC
Surgeon General

Attachment 1

MEASURING COMPLIANCE WITH POLICY

A1.1. Compliance will be measured using dental health class data gathered from RCS: HAF-SGD(Q)7104, *Dental Service Management Report*.

A1.1.1. Compliance with the policy of optimal oral health for Air Force personnel and ensuring maximum wartime readiness will be assessed by measuring the percent of the personnel in dental class 1 and 2 **Figure A1.1**.

A1.1.2. Compliance with the policy to ensure maximum wartime readiness and to provide appointment prioritizing will be measured by the percent of Air Force flyers on active flying status, missile crew members, air traffic controllers, and personnel in mobility positions in dental class 1 and 2 **Figure A1.2**.

A1.1.3. Compliance with the policy to perform a periodic evaluation for all Air Force personnel and providing treatment will be measured by percent of the population in dental class 3 and 4 **Figure A1.3**.

Figure A1.1. Sample Metric of Air Force Personnel in Dental Class 1 and 2.

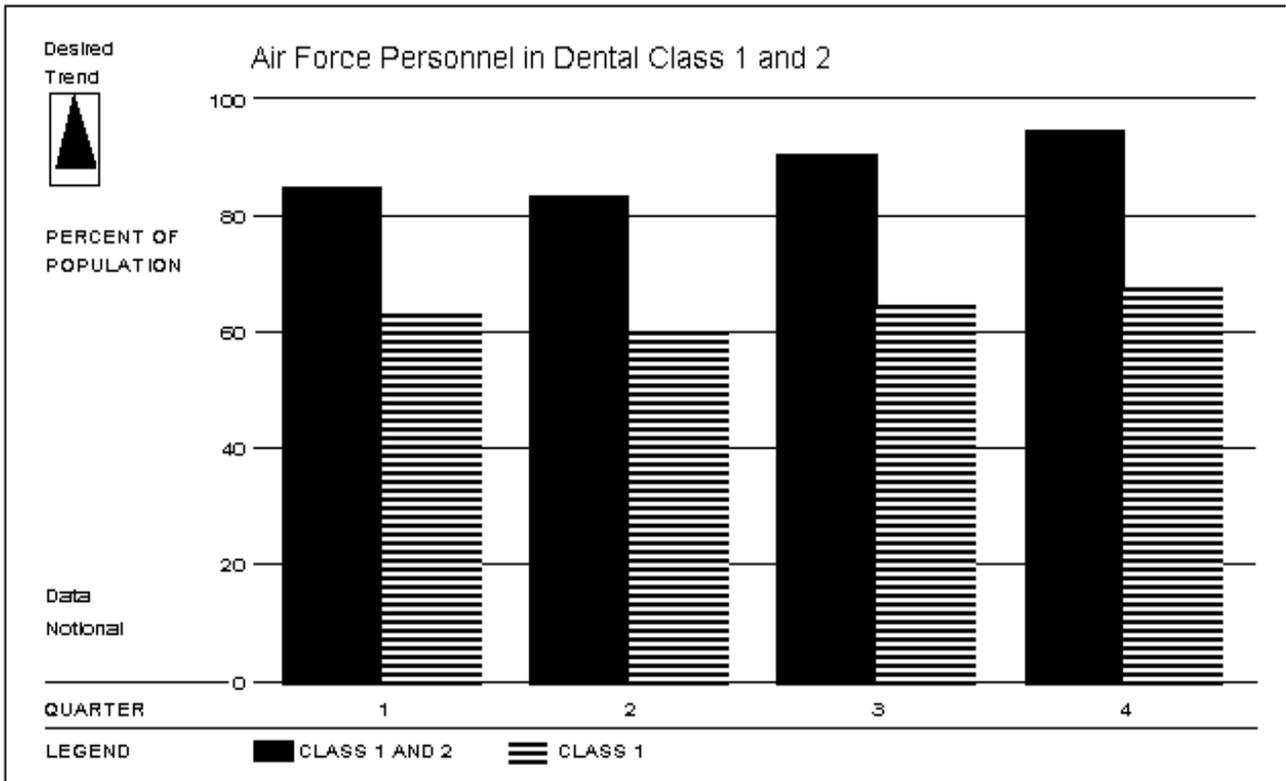


Figure A1.2. Sample Metric of Flyers, Missileers, Controllers, and Mobility Personnel in Dental Class 1 and 2.

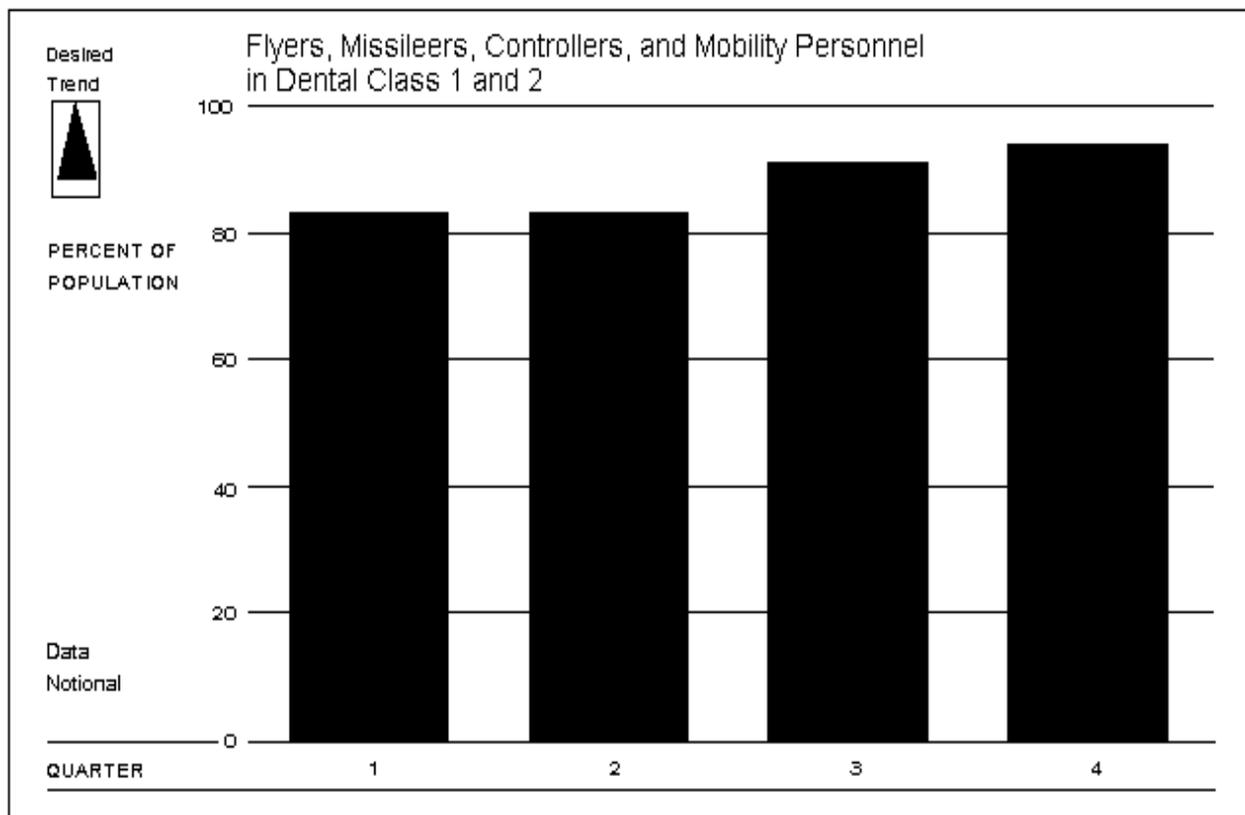


Figure A1.3. Sample Metric of Air Force Personnel in Dental Class 3 and 4.

